

W. W. Cheesewright Trust.

GREASBROUGH
Urban District Council.

ANNUAL REPORT

For the Year 1894,

—BY—

JNO. F. CHEESEWRIGHT,

M.R.C.S., ENGLAND,

MEDICAL OFFICER OF HEALTH.

Rotherham :

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TO THE CHAIRMAN AND MEMBERS OF THE
GREASBROUGH URBAN DISTRICT COUNCIL.

GENTLEMEN,

I have now the honour of submitting my Annual Report on the Sanitary condition of your District for the past year ; and although some of it is undoubtedly satisfactory, yet on the other hand, the continued existence of some form or other of Infectious Disease during the whole year calls for serious consideration.

A great many of the Insanitary conditions now amongst us have been handed down from past years, and it is necessary in future that the Council should be more stringent in matters of House Construction, Drainage, and the indiscriminate building of Pigstyes, Stables, &c. The subject of yards to new dwellings should also not be lost sight of, and it would be advisable that they should be either asphalted or paved, and drained in an effectual manner.

I would also suggest that whenever in the course of excavation for foundations for new buildings, any old rubble or stone-drains be entirely taken out, as frequently they are (if allowed to remain) a serious danger to Public Health, by enabling Sewer Gas to work its way into houses.

I do hope the Council will use all its powers for the obtaining the long talked of Water Supply, as it is useless to expect the District to be free from Zymotic Disease whilst the inhabitants are entirely dependent on shallow wells.

VITAL STATISTICS.

TABLE I.—BIRTHS.

MALE.	FEMALE.	TOTAL.
51	43	94

The number of Births during the past year has been 94, which does not compare so favourably with 1893, when 99 were Registered, but it is quite an average one for the district.

The Birth Rate, calculated on the supposed population for the year, is 28·3 per 1000.

TABLE II.—DEATHS.

MALE.	FEMALE.	TOTAL.
29	21	50

Fifty deaths were Registered during the year, of which 29 were Males and 21 Females; 5 were Registered but Uncertified—these were principally of very young Infants.

INFANT MORTALITY.—16 deaths were of children under 1 year of age, and I regret that this is so unsatisfactory, as this class of Death Rate is much too high as compared with former years, for I find that in the two previous years the figures were :—

1892	...	...	11 deaths.
1893	...	...	13 „
1894	...	...	16 „

This gives an Infantile Death Rate of 4·8 per 1000.

GENERAL DEATH RATE.—The General Death Rate for the year is 15 per 1000.

DISEASES OF THE RESPIRATORY ORGANS.—No less than 21 deaths were Registered as due to the foregoing, which includes Phthisis, Bronchitis, Pneumonia, and Pleurisy; this is not a surprising number considering the prevalence of these diseases in all mining districts, and especially when the locality has a subsoil of clay.

ZYMOTIC DISEASES.

TABLE III.

Scarlet Fever.	Measles.	Total.
1	2	3

The Deaths from Zymotic Disease, as you will see, were only three, one being due to Scarlet Fever and two to Measles. This is extremely satisfactory, as the deaths under this head in 1893, numbered no less than 13. Two deaths were also certified as due to Whooping Cough. It is certainly surprising that the deaths should have been so few, considering that Typhoid, Scarlet Fever and Measles have been continually cropping up in different localities during the year, and it can only be accounted for by the general mild type of the different diseases.

TABLE IV.—Deaths at all Ages.

Under 1 Year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards	Total.
16	5	2	6	13	8	50

These Tables compare very similiary with previous years, the deaths under 1 year and of those between the ages of 15 and 25 nearly always being high. There was one case of Drowning and one of Accidental Death.

SICKNESS.

I intend now to give you the causes of the Sickness in the District for the year, commencing with the Zymotic Diseases.

ZYMOTIC DISEASES.—39 cases of Infectious Disease have been reported to me, viz. :—

Scarlet Fever	...	...	...	32 cases.
Enteric or Typhoid	...	...	6	„
Erysipelas	...	...	1	„
—				39

	Scarlet Fever.	Typhoid.	Erysipelas.
January .....	...	2	
February	4	2	
March	5	1	
April	5	1	
May	1		
June	1		
July	4		
August .....	...	
September.....	2		
October	5	...	1
November	1		
December	4		
	32	6	1

The 32 cases of Scarlet Fever occurred in 18 houses.

The 6 cases of Typhoid occurred in 6 different houses in different parts of the district.

SCARLET FEVER.—As will be seen by the Table, this Epidemic Disease has been more or less prevalent in the district during the whole year. Fortunately it has been confined to 18 houses, New Street having by far the largest number of cases.

TYPHOID FEVER.—The cases reported to me as being this disease occurred in the following localities:—2 at Mangham Quarry, 1 each in Chapel and New Streets, 1 in Fitzwilliam Square, and 1 at Nether Haugh.

All these cases were of an exceptionally mild type, and, as far as I could see, no Insanitary condition was directly responsible for their occurrence.

WHOOPING COUGH.—Although not so prevalent as in 1893, yet there has been a fair number of cases during the year.

MEASLES —It will probably be in the recollection of the Council that at the end of 1893 there was a very severe epidemic of Measles, and it was followed by the pretty general distribution of Scarlet Fever in 1894. I am unable to explain why it should be, but I have in other districts known of a similar outbreak of Epidemic Scarlet Fever following Measles.

ERYSIPELAS.—Only one case was reported, which requires no comment, except that I think it might with no disadvantage be eliminated from Compulsory Notification.

YEAR'S WORK.

During the past year I have attended nearly every meeting of the Sanitary Committee of your Council, as well as having made regular and systemic visits to different parts of the district. Beyond my sanitary visits, I am so frequently professionally in most parts of the Parish, that I have brought to my knowledge and have remedied many insanitary conditions which otherwise might have to wait some time to come round to me through other channels.

There has been no occasion to take any Legal Proceedings during the year.

No Offensive Trades are carried on in the district, and there is only one Slaughter House, which is kept in a fairly good condition. I did not make a Special Report on the Scarlet Fever cases, as it did not in my opinion take the form at any time of a serious outbreak. Beyond advising on many cases of Defective Draining and other Insanitary conditions, I have not had occasion to recommend anything to the serious consideration of the Council.

There are a few recommendations remaining over from 1893, for which I claim your earnest help and attention.

- (1) An immediate and plentiful supply of good water.
- (2) An Isolation Hospital.
- (3) That all removing of Nightsoil be carried out as early in the day as possible (not later than 9 a.m. where feasible), and that greater attention be paid to the removal of the larger refuse, such as Tins, &c., instead of, as is some times the case, when it has been left for a long time, to be distributed by children all over the street.

(4) Thorough flushing of the drains : this of course depends on the Water Supply given.

The district well supplied with Water, a Hospital for the Isolation of Infective Disease, the sewers frequently flushed, and a sharp look out kept for all Insanitary conditions, I do not at all see why your district should not compare favourably with that of any other Authority.

The following have been reported to me by the Sanitary Inspector for the year :—

752 Loads of Nightsoil removed.

257 Visits paid to different parts of the District.

78 Nuisances reported.

50 Nuisances abated.

4 Defective Drains and Gullies remedied.

2 cases of Insufficient Privy Midden Accomodation.

I am, Gentlemen,

Your obedient Servant,

JNO. F. CHEESEWRIGHT.



(A)

94, in the Leastrong Urban District Journal
classified according to DISEASES, AGES, and LOCALITIES.

District.

[illegible]

NOTES ON TABLES A AND B.

NOTE 1. *Medical Officers of Health of "Combined Districts" must make a separate Return for the District of each District Council.*

2. *Medical Officers of Health acting for a portion only of the District of a District Council should write, in the heading of the Table, the designation of the Division for which they act.*

3. *The words "Urban," "Rural," or "Metropolitan" must be inserted in the appropriate space in the heading, according as the District is Urban or Rural, or is within the Metropolitan Area.*

4. *The "Localities" adopted for the purpose of these statistics should be areas of known population; such as parishes, groups of parishes, townships or wards.*

As stated at the head of the first column in each Table, *Public Institutions* should be regarded as separate localities, and the deaths in them should be separately recorded. Workhouses, Hospitals, Infirmarys, Asylums, and other establishments into which numbers of people, and especially of sick people, are received are Public Institutions for the purpose of these statistics.

5. *The deaths which have to be classified in this Table (A), and summed up in the horizontal line of "Totals," are the whole of those registered as having actually occurred in the several localities comprised within the Division or District. But the registered number of deaths frequently requires correction before it can give an exact view of the mortality of a Division or District; and the two lowest horizontal lines are provided for the purpose of enabling Medical Officers of Health to indicate, to the best of their ability, what the extent of such corrections should be. Details concerning the corrective figures, e.g., the institutions that have been considered, or the particular localities to which corrections apply, may appear in the text of the report or in supplementary tables.*

Area and Population of the District or Division to which this Return relates.	
Area in Acres	2270
Population (1891)	3217
Death Rates: { General { per 1,000 { Population.	15
Infant { per 1,000 { Births Registered	48

In recording the facts under the various headings of Tables A and B, attention has been given to the notes endorsed on the Tables.

Wm. Leesbury

Medical Officer of Health.

(Date) *February 5th*, 1895.

11.

3) **TABLE OF POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS**, coming to the knowledge of the Medical Officer of Health, during the year 1894, in the Guastown Urban Sanitary District; classified according to DISEASES, AGES and LOCALITIES.

NAMES OF LOCALITIES adopted for the purpose of these Statistics; Public Institutions being shown as separate localities. (See Note 2 on back of sheet.)	POPULATION AT ALL AGES.		Registered Births.	Aged under 5 or over 5.	NEW CASES OF SICKNESS IN EACH LOCALITY, COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER OF HEALTH.													NUMBER OF SUCH CASES REMOVED FROM THEIR HOMES IN THE SEVERAL LOCALITIES FOR TREATMENT IN ISOLATION HOSPITAL.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					
	Census 1891.	Estimated to middle of 1894.			1 Smallpox.	2 Scarlatina.	3 Diphtheria.	4 Membranous Croup.	FEVERS.					10 Cholera.	11 Erysipelas.	12	13	1 Smallpox.	2 Scarlatina.	3 Diphtheria.	4 Membranous Croup.	FEVERS.					10 Cholera.	11 Erysipelas.	12	13																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
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State here whether "Notification of Infectious Disease" is compulsory in the District Yes. Since when? 1892. Besides the above-mentioned Diseases, insert in the columns with blank headings the names of any that are notifiable in the District, and fill the columns accordingly. State here the name of the Isolation Hospital used by the sick of the District. Mark (H) the Locality in which such Hospital is situated; and if not within the District, state where it is situated. Not Hospital

NOTES ON TABLE B.

(See also Notes on back of Table A.)

- NOTE 1. The present *Table B.* is concerned with population, births, and sickness (not with mortality) in the district or division to which the Table relates.
2. As stated in the heading of Col. (a), *Public Institutions* should be regarded as separate localities, and the new cases of sickness in them should be separately recorded. Workhouses, Hospitals, Infirmaries, Asylums, and other establishments into which numbers of people, and especially of sick people, are received, are Public Institutions for the purpose of these statistics.
3. *Comments on any unequal incidence of notifiable disease upon the several localities, and considerations as to the local incidence of consumption and other prevalent diseases, should be made in the text of the Report.*